

Work Order ID 90135***90135***

Page 1

September-13-12 1:44:21 PM

Item ID: D3265-043

Accept

N900040100

Setup

Start ***NS1***

Revision ID:

Item Name: Rib Assembly

Stop

NS2Start Date: 10/01/12 Start Qty: 1.00 ***1***

Cust Item ID:

Required Date: 10/01/12 Req'd Qty: 1.00 ***1***

Customer:

Reference:

Approvals: Process Plan: MLJDate: 12-09-17 Tooling:

Date:

Run

Start ***NR1***

QC:

Date: SPC (Y/N):

Date:

Stop

NR2

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D3265	E								
100	Weld per dwg A/R S.S. rod Batch: <u>H03803</u>	0.00							
100 Large Fab	Memo	0.00							<u>① 13-08-21</u> <u>PD</u>
Large Fab	1- Cut D3265-7 as per dwg 2- Drill holes and c'sink them as per dwg using DT9814 3- Deburr and remove identification markings on tube								
105	QC10- Inspect visual per QSI004- ground welds	0.00	<u>SW</u>	<u>DAS</u>					
105 QC	Memo	0.00	<u>13-8-21</u>	<u>27</u>	<u>9-89</u>				<u>1</u>
Quality Control									
110	QC6- Inspect dimensions to drawing	0.00							
110 QC	Memo	0.00	<u>DAS</u>	<u>27</u>	<u>9-89</u>				<u>1</u>
Quality Control									
			<u>13-8-21</u>						

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____		DISPOSITION			AGAINST DEPARTMENT/PROCESS						
Part No. _____		Rework	<input type="checkbox"/>	Skid-tube	<input type="checkbox"/>	Crosstube	<input type="checkbox"/>	Water Jet	<input type="checkbox"/>	Engineering	<input type="checkbox"/>
NCR No. _____		Scrap	<input type="checkbox"/>	Machining	<input type="checkbox"/>	Small Fab	<input type="checkbox"/>	Prod. Eng. Coor.	<input type="checkbox"/>	Quality	<input type="checkbox"/>
		Use-as-is	<input type="checkbox"/>	Thermoforming	<input type="checkbox"/>	Finishing	<input type="checkbox"/>	Rec/Store/Packaging	<input type="checkbox"/>	Other	<input type="checkbox"/>
		Work Order Update	<input type="checkbox"/>	Large Fab	<input type="checkbox"/>	Composite	<input type="checkbox"/>	Supplier	<input type="checkbox"/>		
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description		Sign & Date	Verification	QC Inspector
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear				General							
				Bending	<input type="checkbox"/>	Bend	<input type="checkbox"/>	Grain	<input type="checkbox"/>	Ovalized	<input type="checkbox"/>
Centre Not Concentric to O/S	<input type="checkbox"/>	BOM/Route	<input type="checkbox"/>	Hardware	<input type="checkbox"/>	Over/Under tolerance	<input type="checkbox"/>	Temperature/Cure			
Cracks	<input type="checkbox"/>	Broken/Damaged	<input type="checkbox"/>	Inspection Incomplete	<input type="checkbox"/>	Part Incorrect	<input type="checkbox"/>	Weld			
Crushed/Crimped.	<input type="checkbox"/>	Burrs	<input type="checkbox"/>	Instructions Incomplete/Unclear	<input type="checkbox"/>	Part Lost/Missing	<input type="checkbox"/>	Wrong Stock Pulled			
Cuffs	<input type="checkbox"/>	Contamination	<input type="checkbox"/>	Maintenance	<input type="checkbox"/>	Part Moved	<input type="checkbox"/>				
Heat Treat	<input type="checkbox"/>	Countersink	<input type="checkbox"/>	Mislabeled	<input type="checkbox"/>	Positioned Wrong	<input type="checkbox"/>				
Inspection Strip in Tube	<input type="checkbox"/>	Cut Too Short	<input type="checkbox"/>	Misread	<input type="checkbox"/>	Power Loss/Surge	<input type="checkbox"/>	Other			
Ripples in Bend	<input type="checkbox"/>	Drill Holes	<input type="checkbox"/>	Offset	<input type="checkbox"/>		<input type="checkbox"/>				
Torque Waves in Extrusion	<input type="checkbox"/>	Drawing	<input type="checkbox"/>	Out of Calibration	<input type="checkbox"/>		<input type="checkbox"/>				
Turning Sequence	<input type="checkbox"/>	Finish	<input type="checkbox"/>	Out of Sequence	<input type="checkbox"/>		<input type="checkbox"/>				
Wave/Twist in Tube	<input type="checkbox"/>	Folio	<input type="checkbox"/>	Outside Dimensions	<input type="checkbox"/>		<input type="checkbox"/>				

Work Order ID 90135

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Page 2

Item ID: D3265-043

Accept

N900040100

Setup

Start

NS1

Revision ID:

Item Name: Rib Assembly

Stop

NS2

Start Date: 10/01/12 Start Qty: 1.00 *1*

Cust Item ID:

Required Date: 10/01/12 Req'd Qty: 1.00 *1*

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

120

Identify as per dwg & Stock Location: WAO01

0.00

120

Packaging

Packaging

①

13-08-21

11

130

QC21- Final Inspection - Work Order Release

0.00

130

QC

Quality Control

Memo

0.00

M5

13-08-22

ELB/6/21

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>			
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>			
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>			
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data										
Equip/Tooling										
Operator										
Material										
Setup										
Other										
Process										
Supplier										
Training										
Unapproved										
FAULT CATEGORY										
Landing Gear	General									
	Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	Grain <input type="checkbox"/>	Ovalized <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>					
	Centre Not Concentric to O/S <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Hardware <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>					
	Cracks <input type="checkbox"/>	Broken/Damaged <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Weld <input type="checkbox"/>					
	Crushed/Crimped. <input type="checkbox"/>	Burrs <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>					
	Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Part Moved <input type="checkbox"/>						
	Heat Treat <input type="checkbox"/>	Countersink <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>						
	Inspection Strip in Tube <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Misread <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>	Other <input type="checkbox"/>					
	Ripples in Bend <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Offset <input type="checkbox"/>							
	Torque Waves in Extrusion <input type="checkbox"/>	Drawing <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>							
	Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>							
	Wave/Twist in Tube <input type="checkbox"/>	Folio <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>							

Picklist Print

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Page 1

Work Order ID: 90135

Parent Item: D3265-043

Parent Item Name: Rib Assembly

Start Date: 10/01/12

Required Date: 10/01/12

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP REV:A 12.07.26 AS PER DWG REV.D DD VERF:EC IPP REV:B 12.08.08 AS PER
DWG REV.E DD VERF:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D3759-1 Bushing		Manufactured	No			100	Each	86.0000	3	3		13.08.21 PD	
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				WA		85							6100805>(3)
					79213	1							
					83464	7							
					86550	77							
				WA005		1							
					66489	1							
M304TS0.750W.065 304 SQ Tube .75x.75x.065W		Purchased	No			100	f	1,362.9860	4.729	4.9778947		13.08.21 PD	
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				MAT		321.986							KUSS13 -X(4.97)
					112398	0							
					122051	321.986							
				MAT017		1000							
					122468	1000							
				MAT018		41							
					7636	41							

NCR: Yes / No

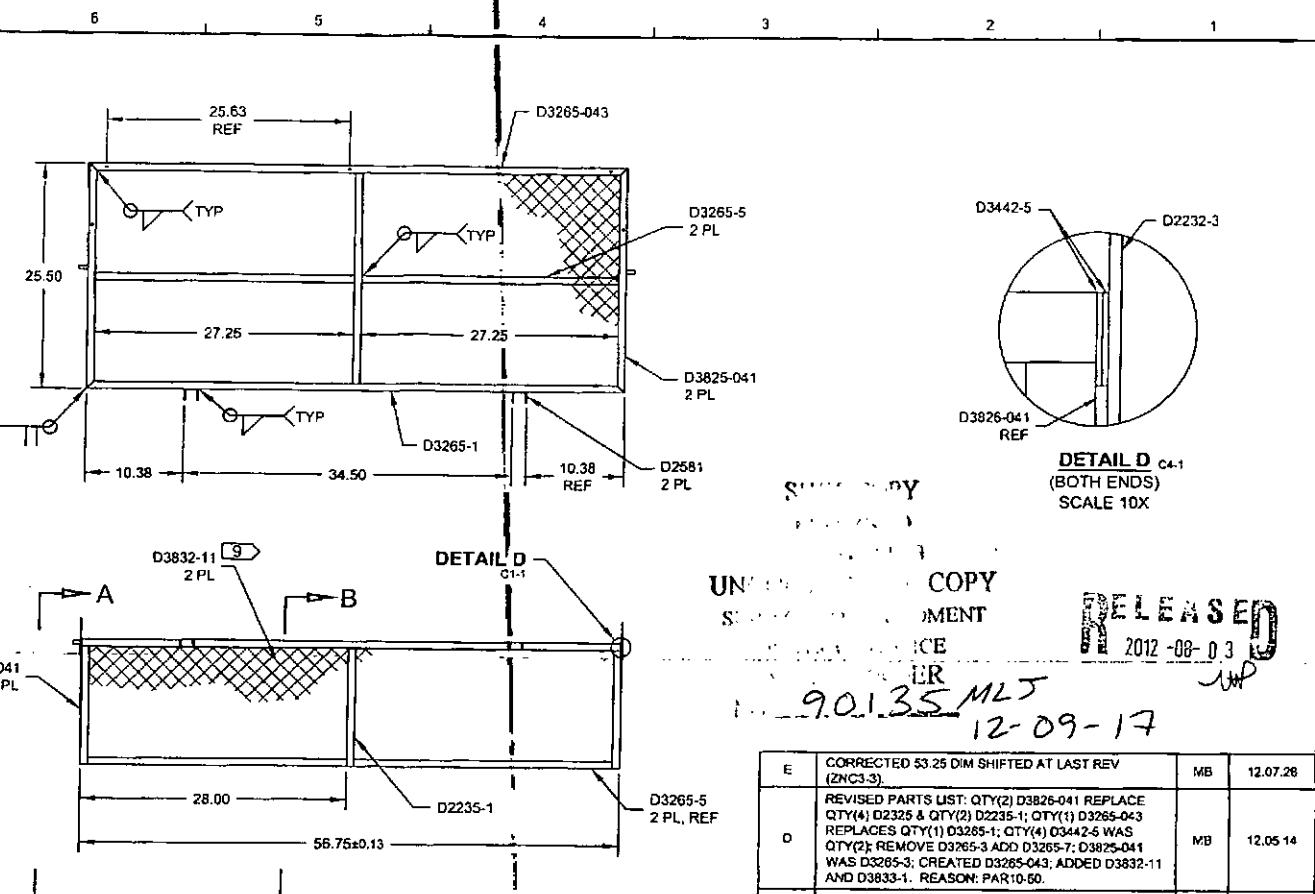
DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS									
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>								
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>								
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>								
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>									
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description		Sign & Date	Verification	QC Inspector				
Doc/Data															
Equip/Tooling															
Operator															
Material															
Setup															
Other															
Process															
Supplier															
Training															
Unapproved															
FAULT CATEGORY															
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio				<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled	

QTY	PART NUMBER	DESCRIPTION
1	D3265-041	BASKET BASE ASSY
2	D2232-3	HINGE PLATE
1	D2235-1	RIB
2	D2581	MOUNTING BRACKET
1	D3265-1	RIB
1	D3265-043	RIB ASSY
2	D3265-5	RIB
4	D3442-5	SHIM
2	D3825-041	RIB ASSY
2	D3826-041	RIB/GUSSET ASSY
1	D3832-11	MESH (BASE, SM)
2	D3833-1	MESH, BASE END FACE



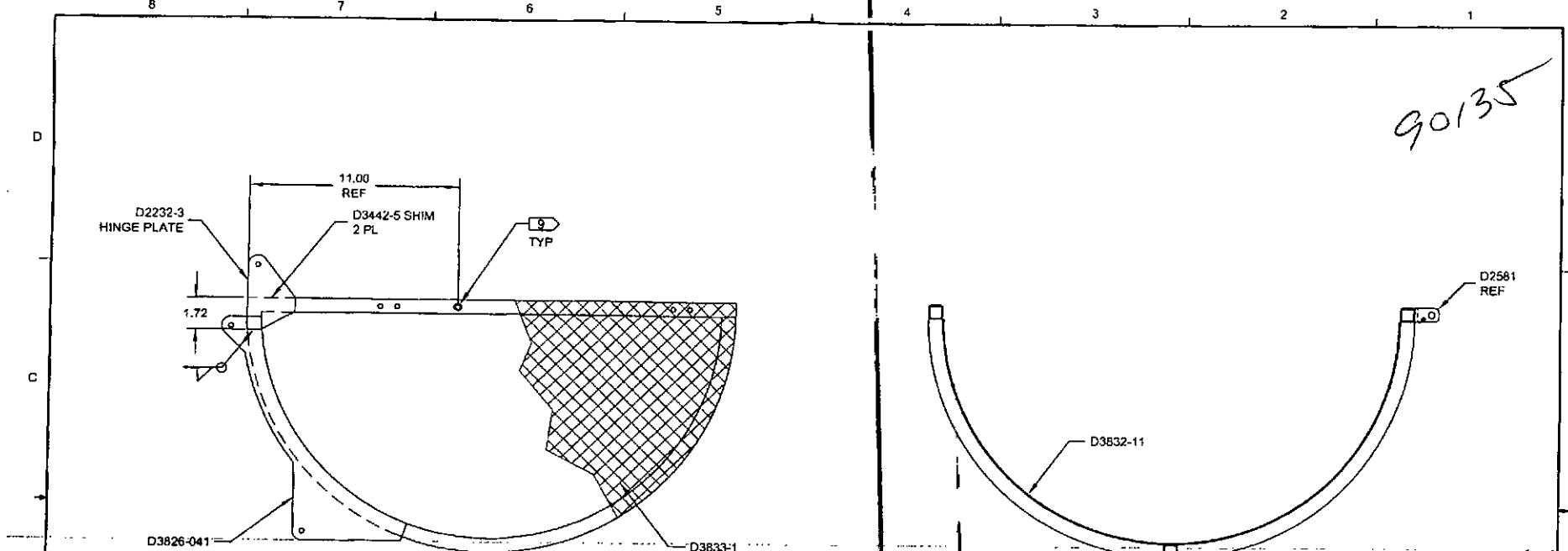
D3265-041 BASKET BASE ASSEMBLY

NOTES:

- 1) MATERIAL: N/A
- 2) FINISH: POWDER COAT ASSEMBLY GLOSS WHITE (4.3.5.2) PER DART QSI 005 4.3
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: N/A
- 8) WELD PER DART QSI 004
- 9) SKIN INSIDE SURFACE OF BASKET WITH D3832-11, TACK WELD EACH END OF STRAND TO FRAME

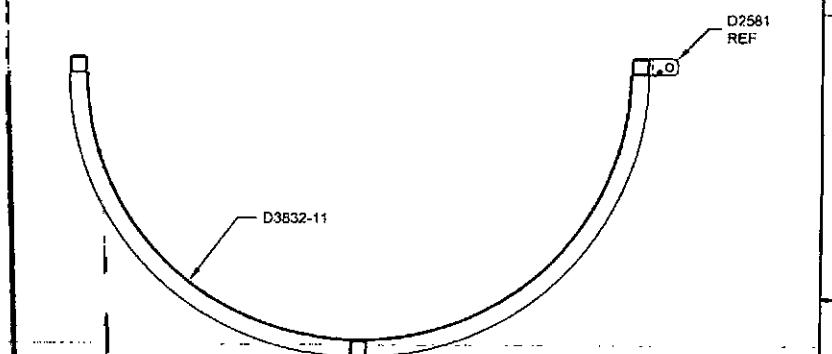
REV.	DESCRIPTION	BY	DATE
DESIGN	DS	DART AEROSPACE LTD	HAWKESBURY, ONTARIO, CANADA
DRAWN		DRAWING NO.	REV. E
CHECKED		D3265	SHEET 1 OF 3
MFG. APPR.		TITLE	SCALE
APPROVED		BASKET BASE ASSEMBLY (350)	NTS
DE APPR.		DATE	12.07.26

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prior written consent and specific approval.



SECTION A-A B6-1
2 PL
(BOTH END RIBS)

NOTES:
 1) MATERIAL: N/A
 2) FINISH: N/A
 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
 4) UNITS: INCHES UNLESS OTHERWISE NOTED
 5) BREAK SHARP EDGES: N/A
 6) IDENTIFICATION: N/A
 7) WEIGHT: N/A
 8) WELD PER DART QSI 004
 9) TRIM EXPANDED METAL LOCALLY AS REQUIRED, TYP BOTH ENDS



SECTION B-B B6-1
2 PL
(BOTH CENTER RIBS)

RELEASED
2012-03-03
W

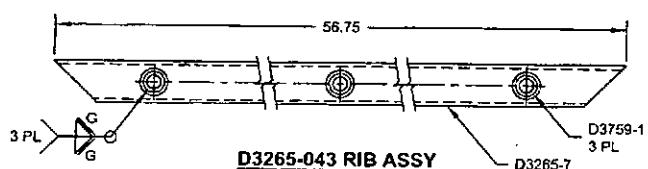
DESIGN	DS	DART AEROSPACE LTD
DRAWN	<i>✓</i>	HAWKSLEY, ONTARIO, CANADA
CHECKED	<i>✓</i>	DRAWING NO. D3265
MFG. APPR.	<i>✓</i>	REV. E
APPROVED	<i>✓</i>	SHEET 2 OF 3
DE APPR.	<i>✓</i>	TITLE
DATE	12.07.26	SCALE
		BASKET BASE ASSEMBLY (350)
		NTS

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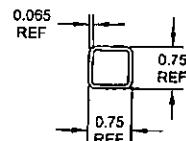
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QTY	PART NUMBER	DESCRIPTION
1	D3265-043	RIB ASSY
1	D3265-7	RIB
3	D3759-1	BUSHING

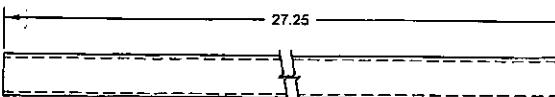
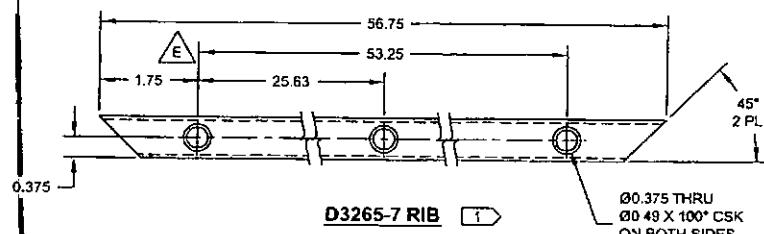
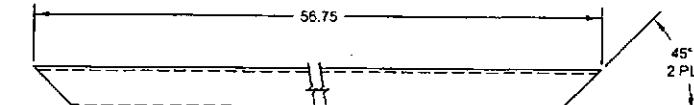


TYP SECTION



NOTES:

- 1) MATERIAL: AISI 304/316 SEAMLESS STAINLESS STEEL SQUARE TUBING PER ASTM A554/A269 MILL FINISH, 0.75 X 0.75 X 0.065 WALL REF. DART SPEC M304TS0.750W.065
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: N/A
- 8) WELDING: PER DART QSI 004



RELEASED
2012-08-03
WJ

DESIGN	DS	DART AEROSPACE LTD	
DRAWN		HAWKESBURY, ONTARIO, CANADA	
CHECKED		DRAWING NO.	REV. E
MFG. APPR.		D3265	SHEET 3 OF 3
APPROVED		TITLE	SCALE
DE APPR.		BASKET BASE ASSEMBLY (350)	NTS
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